

ISSUE SLIP STAPLE AREA (for additional cross references)

| POSITION | INITIALS | ID NO. | DATE |
|---------------------------|-----------|--------------|----------|
| FEE DETERMINATION | <i>MG</i> | | 8/14/00 |
| O.I.P.E. CLASSIFIER | <i>DM</i> | <i>152</i> | 8/15/00 |
| FORMALITY REVIEW | <i>LA</i> | <i>64390</i> | 10/02/00 |
| RESPONSE FORMALITY REVIEW | | | |

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral)..... Canceled A Appeal
 ÷ Restricted O Objected

| Claim | Date |
|----------------|----------|
| Final Original | |
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| Claim | Date |
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Best Available Copy

If more than 150 claims or 10 actions
staple additional sheet here

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